



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit: 2642

Examiner: Harry S. Hong

"Express Mail" Mailing Label Number: EV717835272US

In Re.: Igor Neyman et al.

Date of Deposit: 09/08/2005

Ref: Case Docket No.: P3244D2

Serial No.: 09/661,181

Filed: 09/13/2000

Subject: Negotiated Routing in Telephony Systems

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir:

**PETITION FOR EXTENSION OF TIME TO RESPOND
UNDER 37 CFR § 1.136**

Applicant hereby petitions for an extension of time of two (2) months, to respond to the office action letter mailed in the above-referenced case on 05/04/2005, for which a 3-month shortened statutory period was set to expire on 08/04/2005. This requested extension extends the time for response to 10/04/2005.

☐ The petitioner is an established small entity.

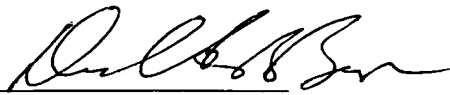
☒ A check for \$450.00 is enclosed for the extension fee.

09/14/2005 EAYALEW1 00000014 09661181

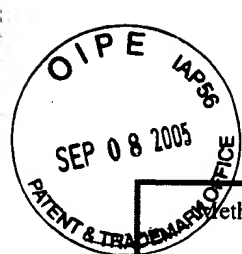
01 FC:1252

450.00 DP

Respectfully submitted,
Igor Neyman et al.

By 
Donald R. Boys
Reg. No. 35,074

Central Coast Patent Agency
P.O. Box 187
Aromas, CA 95004
(831) 726-1457



Method of Transmission: EV717835272US

CASE DOCKET NO. P3244D2

In reference to application of Igor Neyman et al.

Serial No. 09/661,181

For Negotiated Routing in Telephony Systems

Sir:

Transmitted herewith is and an amendment in the above-identified application, under 37 C.F.R. 1.312.

- ☐ No additional fee is required.
☐ Applicant claims Small entity status under 37 CFR 1.27.
☒ The fee has been calculated as shown below.

**** CLAIMS AS AMENDED ****							
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest No. Paid For Previously	(5) Present Extra	(6) Rate Small Entity	(7) Rate Large Entity	(8) Additional Fee
Total Claims	4	Minus	** 20	0	\$ 25	\$ 50	\$ 0.00
Indep Claims	2	Minus	*** 3	0	\$ 100	\$ 200	\$ 0.00
<input type="checkbox"/> First presentation of a multiple dependent claim					\$ 0	\$ 0	\$ 0.00
<input type="checkbox"/> Terminal Disclaimer Fees							\$ 0.00
Extension Fee	<input type="checkbox"/> 1st Month		<input checked="" type="checkbox"/> 2nd Month		<input type="checkbox"/> 3rd Month		\$ 450.00
Total additional for claims, time extensions and disclaimer fees							\$ 450.00

** If the "highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Multiple dependencies, if any, included in the above calculation.

* If the entry in column 2 is less than the entry in column 4, write "0" in column 5.

☒ A check in the amount of 450.00 is attached.

☐ Charge \$ 0.00 to deposit account 50-0534. (A duplicate of this sheet is enclosed)

☒ Please charge any additional fees or credit overpayment to Deposit Account 50-0534. A duplicate of this sheet is enclosed.

Respectfully Submitted,

Donald R. Boys
Reg. No. 35074

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